## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

50953

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			20	20				RATE	FEE	2. abe	RATE	FEE
FC	)R		NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	370.00	OR	BASIC FEE	740.00
TC	TAL CHARGEA	ABLE CLAIMS	7,0 minus 20=		· 6			X\$ 9=	-	OR	X\$18=	
INE	DEPENDENT CL	LAIMS	3 minus 3 =		* Ø		T	X42=		OR	X84=	
MU	ILTIPLE DEPEN	NDENT CLAIM PI	RESENT					+140=	·,	OR	+280=	
* If	the difference	in column 1 is	less than z	ss than zero, enter		"0" in column 2		TOTAL		OR	TOTAL	740
	CLAIMS AS AMENDED - PART II									Topphe by	OTHER	THAN
(Column 1)			*	(Colum		(Column 3)		SMALL E	ENTITY	OR	SMALL	ENTITY
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	*	RATE	ADDI- TIONAL FEE
ND	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESE			+140=	10	OR	+280=					
								TOTAL		1	TOTAL	
						AD	DIT. FEE		OR	ADDIT. FEE		
		(Column 1)		(Colur		(Column 3)						
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	* ENTATION OF MU	Minus .	***	CL AIM	=		X42=	·	OR	X84=	
<b>L</b>	FIRST FRESE	NIAHON OF MIC	JLIPLE DE	PENDERI	CLATIVI			+140=		OR	+280=	
								TOTAL DIT. FEE		OR ,	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)								•				
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Ş Q	Total	*	Minus	**		=	;	X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF MI	JLTIPLE DE	DEPENDENT CLAIR			-			Un		
	t the entry in colu	· 1 is lace than th	to entar in cal	······································	***** in oo	slovena G	L	140=		OR	+280=	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
'	The "Highest Nurr	nber Previously Pai	id For" (Total c	or Independe	ent) is the	e highest number f	found	I in the app	ropriate box	in coli	umn 1.	ļ